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**\*\* CONTINUING DATA \*\*\*\*\***  
*mk*  
  
**\*\* FOREIGN APPLICATIONS \*\*\*\*\***  
*mk*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
**\*\* 06/26/2004**

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>mk</i>	<b>STATE OR COUNTRY</b> MN	<b>SHEETS</b> <b>DRAWING</b> 8	<b>TOTAL</b> <b>CLAIMS</b> 23	<b>INDEPENDENT</b> <b>CLAIMS</b> 4
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**ADDRESS**  
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**TITLE**  
 Automated template generation algorithm for implantable device

<b>FILING FEE</b>  <b>RECEIVED</b> 1040	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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